



HealthSource RI Conference Room A  
33 Broad Street  
1:00 pm – 2:30 pm  
June 17, 2014  
Meeting Minutes

**Attendees:** Christine Ferguson, HSRI Director; Geoff Grove, Vice Chair; Peter Howland, Linda Katz, Mike Gerhardt and Amy Zimmerman; Margaret Holland McDuff attended via phone

**I. Call to Order**

Geoff Grove, Advisory Board Vice Chair, called the meeting to order at 1 pm.

**II. Approval of the May Meeting Minutes** – The Advisory Board unanimously approved the May meeting minutes.

**III. 2015 Insurance Rates and Forms – Sarah Nguyen**

- i. Office of the Health Insurance Commissioner will take testimony at a Public Input Session on June 17. Public comment will be accepted through June 24.
- ii. OHIC will carry out its statutorily mandated Direct Pay hearing on the Blue Cross Blue Shield of RI rates.
- iii. Sarah Nguyen shared the rates and plans, which she described as being “in flux.” The up-to-date filed rates and plans are available on the OHIC website (<http://www.ohic.ri.gov/2014%20Rate%20Factor%20Review.php#>)
- iv. OHIC approves the Essential Health Benefits (EHB) base rate, which represents the monthly average rate for a 21 year old. There are a number of caveats in the filings, since the numbers are not quite comparable across carriers and have been calculated in different ways. Some carriers did not submit trend factors, while BCBSRI did.
- v. Rates and forms will be reviewed by the middle of July.
- vi. Director Ferguson made the point that HSRI is taking the information as filed and putting it into the rate sheet format it has been using and looking at the age rates for each one. HSRI is also creating a document that is comparing small group plans on and off the exchange, showing that the pricing is the same. Director Ferguson noted that HSRI is also looking at what is offered on and off the exchange. As HSRI develops new consumer tools and information for individuals and businesses, it will incorporate the pricing information. It is expected that brokers may find this information helpful.

**IV. Director’s Report**

- i. **System Problem:** HSRI is dealing with some issues on the back end of the HSRI system that cause consumers to be involuntarily dis-enrolled, even though they have paid. Some of them have gone to a pharmacy or a hospital and been denied coverage. Staff reports approximately 1,500 who have experienced this problem and HealthSource RI is working with the carriers so that these situations can be addressed quickly in an emergency situation. In most non-emergency situations, account issues are resolved in approximately five to seven days. HSRI staff is proactively reviewing records to ensure that additional customers don't experience inadvertent dis-enrollments.
- ii. **Legislative Update:** Director Ferguson noted that the legislature was expected to conclude on Friday (June 20) and so far, there was no movement on the legislation to move HSRI to the federal government and no budget amendments addressing HSRI. Director Ferguson thanked Mike Gerhardt for attending the House Finance committee meeting on the bill that would have sent HSRI to the federal government, and was apologetic that the committee was not asked to have him testify near the beginning of the hearing. Mike noted that the legislature's understanding of HSRI seems minimal, and there is a strong perspective that no state funds be used to support HSRI. The Advisory Board discussed a draft letter from the Board that was to be sent to legislators, over the signature of Advisory Board Vice Chairman Geoffrey Grove. After making several suggestions for changes to the draft, the Advisory Board approved the letter and asked that it be sent.
- iii. **RI Small Business Journal:** Director Ferguson called the Advisory Board's attention to an article in the RI Small Business Journal about Phil Papoojian's employees' decision to have Mereco Technologies Group purchase insurance through HSRI, using Full Employee Choice.
- iv. **RIte Care/RIte Share Renewals:**
  - 1. Advisory Board Member Linda Katz raised another legislative issue that affects HSRI. The General Assembly has directed the Executive Office of Health and Human Services (EOHHS) to implement renewals for families on RIte Care and RIte Share starting in June, instead of next January. The Assembly is doing this to save the state money, because it expects some families to have had changes in income that will move them from Medicaid eligibility to the ability to purchase insurance with a tax credit. There has been good coordination between EOHHS, HSRI and the Contact Center, and Linda Katz's organization, the RI Health Coverage Project, has been involved as well. Some 42,000 people will be required to set up accounts on the UHIP computer system – and most of them are expected to come through the Contact Center. She noted that the challenge is to make sure that none of these families lose their coverage because of an inability to process their enrollment rather than an income change.
  - 2. Director Ferguson responded that there are many interagency issues that HSRI is working through – that the depth of involvement by the Contact Center from a walk-in and a phone perspective has far exceeded what was originally intended. HSRI is monitoring the ability of the Contact Center to accomplish all of its goals (for

example, retention issues and consumer education) if it is fully responsible for these renewals.

- a. A discussion of which agency should be responsible for staff resources for DHS renewals was held. Director Ferguson said that how the cost allocation was considered when grants were established and how the various agencies should define roles (essential to proper functionality of all agencies) must be considered. Katz responded that these questions are a part of HSRI's ongoing sustainability conversation – and how the integrated delivery system will work from the consumer's perspective.
- v. **Special Enrollment Periods:** Marti Rosenberg presented on HSRI's focus on enrolling those Rhode Islanders whose life circumstances make them able to take advantage of Special Enrollment Periods (SEPs). If someone moves into Rhode Island, loses insurance through a job, or has a change in family size through the birth of a baby or divorce (in addition to some other life circumstances), they are able to enroll in coverage outside of the open enrollment period. The outreach team and HSRI communications staff have shared this information in a variety of ways. The outreach team is approaching realtors (to reach people moving into Rhode Island), the state Department of Labor and Training (to reach those losing their jobs), clergy (to reach those getting married), and mediators and divorce attorneys (to reach those going through divorce). The Contact Center and the RIPIN navigators are also assisting. Mike Gerhardt suggested targeting earned media as well.
- vi. **CCIIO Site Visit:** Director Ferguson described an upcoming site visit from the Center for Consumer Information and Insurance Oversight (CCIIO), which is a part of the Center for Medicare and Medicaid Services. CCIIO regulates the state health benefits exchanges. Ferguson expects an intensive visit, but noted that because of the regular communication between HSRI and CCIIO, she does not expect any surprises. Vice-Chairman Geoff Grove will represent the Advisory Board during this site visit.
- vii. **Sustainability:** Director Ferguson ended the Director's Report by addressing the proposed July Advisory Board meeting on HSRI sustainability. She noted that she has already presented sustainability options to this body. Next month, the Advisory Board will review the process by which HSRI will get some clarity on these options leading up to the next legislation session.

## V. SHOP Update

- i. Director Ferguson began the update on SHOP by referring to a data report that shows that HSRI is making headway, but progress is slow. She thanked the Advisory Board members for facilitating conversations between HSRI staff and employers. HSRI is working closely with brokers and has set up a new sales team.
- ii. Ferguson asked for additional help from Advisory Board members, encouraging members to help staff identify potential businesses for conversations and for feedback on what businesses need to know

about HSRI. If there are any organizations that Board members are involved with who would like to hear from HSRI, staff will set up those meeting.

- iii. Advisory Board members then discussed with Director Ferguson why HSRI was as successful as it has been compared to other state-based exchanges. Ferguson noted that, in general, HSRI has had three successes: helping develop more competition, more choice, and having an impact on rates. Mike Gerhardt asked about broker involvement with SHOP. Ferguson answered that HSRI is seeing brokers embrace the idea of choice. She thinks that it will continue to pick up steam.
- iv. Vice-Chairman Grove stated that HSRI is part of a paradigm shift, and that it's difficult to change the status quo.
- v. Director Ferguson apologized that there was no time left in the meeting to review the HSRI data for this month.

**VI. Proposed July Meeting Date Change**

- i. Vice-Chairman Grove asked the Advisory Board whether they would be able to postpone the July meeting one week, until July 22<sup>nd</sup>. Advisory Board members agreed unanimously.

**VII. Public Comment**

- i. Betsy Loucks from HealthRight spoke, describing HealthRight as a coalition on health policy in Rhode Island. HealthRight sees the exchange as a critical tool for reform, and is doing its best to support the exchange at the legislature. During its last meeting, HealthRight agreed to coordinate more on the public messaging on the benefits of the exchange. She encouraged Advisory Board members to attend their meetings, or to ask others to attend, and to use HealthRight as a resource for information.

**VIII. Meeting Adjourned** The meeting adjourned at 2:30 pm.